

01-0922

11040 U.S. PTO
01/07/02

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01/07/0211040 U.S. PTO
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UTILITY PATENT APPLICATION TRANSMITTAL

(only for new non-provisional applications
under 37 CFR 1.53(b))

Attorney Docket No.

ORT-1565

First Named Inventor or Application Identifier

DARROW, Andrew L.

Express Mail No.

EU014011286US

APPLICATION ELEMENTS

See MPEP Chapter 600 concerning
utility patent application contents.

ADDRESS TO: Assistant Commissioner for Patents
BOX PATENT APPLICATION
Washington, DC 20231

1. ☒ **Fee Transmittal Form** (attached hereto in duplicate)
2. ☒ **Specification** [Total Pages: 69]
3. ☒ **Drawing(s)** (35 USC 113) [Total Sheets: 6]
4. **Oath or Declaration:** A copy from a prior application is attached hereto (37 CFR 1.63(d)).
5. **Nucleotide and/or Amino Acid Sequence Submission** (if applicable, all necessary)
 - a. ☒ Computer Readable Copy
 - b. ☒ Paper Copy (identical to computer copy)
 - c. ☒ Statement verifying identity of above copies

6. ☒ **Information Disclosure Statement** (IDS)/PTO-1449
7. ☒ **Preliminary Amendment**
8. ☒ **Return Receipt Postcard** (MPEP 503) (Should be specifically itemized)
9. ☒ **Other: Express Mail Certification**

10. ☐ **Incorporation by Reference** (useable if Box 4c is checked)

The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4c, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.

PRELIMINARY AMENDMENT

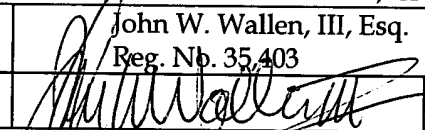
11. Please amend the specification by inserting before the first line: This is a Divisional of
prior application No.: 09/386,653, filed 31 August 1999, now U.S. Patent No. 6,458,584

12. Please cancel original Claims 1-16 and 21-27 of the prior application before calculating the filing fee.

13. **Correspondence Address:** Name: Philip S. Johnson, Esq.
Address: Johnson & Johnson
One Johnson & Johnson Plaza
New Brunswick, NJ 08933-7003, USA

14. **Telephone Contact:** Please direct all telephone calls or tele-faxes to John W. Wallen, III at:
Telephone: (858) 784-3239 Fax: (732) 524-2808

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

NAME	John W. Wallen, III, Esq. Reg. No. 35,403		
SIGNATURE		DATE	7 January 2002

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FEE TRANSMITTAL	<i>Complete if Known</i>	
	<i>Application Number</i>	NOT ASSIGNED
	<i>Filing Date</i>	7 January 2002
	<i>First Named Inventor</i>	DARROW
	<i>Group Art Unit</i>	1652
	<i>Examiner Name</i>	MOORE, W.
	<i>Attorney Docket Number</i>	ORT-1565

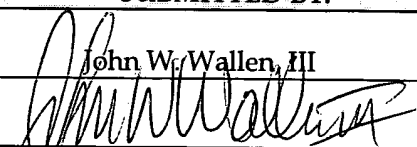
FEE CALCULATION

CLAIMS AS FILED

(1)	(2)	(3)	(4)	(5)
FOR:	NUMBER FILED	NUMBER EXTRA	RATE	BASIC FEE (\$710.00)
TOTAL CLAIMS	4 - 20 =	0	x 18.00	\$ 0.00
INDEPENDENT CLAIMS	2 - 3 =	0	x 80.00	\$ 0.00
MULTIPLE DEPENDENT CLAIMS	<input type="checkbox"/>	N/A	\$270.00	
			TOTAL FEES	\$ 710.00

METHOD OF PAYMENT

- ☒ Please charge Deposit Account No. 10-0750/ORT-1565/JWW in the amount of \$710.00. Three copies of this sheet are enclosed.
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required in connection with the filing of this communication, or credit any overpayment, to Account No. 10-0750/ORT-1565/JWW. Three copies of this sheet are enclosed.

SUBMITTED BY:		<i>Complete (if applicable)</i>
<i>Typed or Printed Name</i>	John W. Wallen, III	Reg. No. 35,403
<i>Signature</i>	 Date: 7 Jan. 2002	<u>Deposit Account</u> No. 10-0750

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